

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	RR		10/16/01
O.I.P.E. CLASSIFIER		49	10/29/01
FORMALITY REVIEW	H.T.	1117	11/14/01
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ ..... Rejected                      N ..... Non-elected  
= ..... Allowed                      I ..... Interference  
- (Through numeral)... Canceled      A ..... Appeal  
+ ..... Restricted                      O ..... Objected

Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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